STATEMENT OF

FORM 1	ORGANIZATION (See instructions)	Office use only
NAME OF COMMITTEE (in to the community of the commun	(Check if name Example: If typying, type over the lines	12FE4M5
NATIONAL AIF	R TRANSPORTATION ASSOCIATION POLITICAL ACTION	COMMITTEE
ADDRESS (number and s	4226 KING STREET	
(Check if address is changed)		
	ALEXANDRIA	VA 22302 - 1 1 1
	CITY▲	STATE▲ ZIP CODE ▲
COMMITTEE'S E-MAI	L ADDRESS (Please provide only one e-mail address)	
(Check if address is changed)	natapac@nata.aero	
COMMITTEE'S WEB	PAGE ADDRESS (URL)	
(Check if address is changed)	None	
2. DATE 03	/ D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
3. FEC IDENTIFICA		
4. IS THIS STATEM		
I certify that I have examin	ned this Statement and to the best of my knowledge and belief it is true, correct	and complete
	Treasurer Michael Delk	
Type or Print Name of	TreasurerWICHAEL DEIK	
Signature of Treasurer	Electronically Filed by Michael Delk	Date 03 / 24 / 2009
NOTE: Submission of fal	se, erroneous, or incomplete information may subject the person signing this S ANY CHANGE IN INFORMATION SHOULD BE REPORTE	•
Office Use Only	For further informatic Federal Election Comm Toll Free 800-424-953 Local 203 694, 1100	nission FEC FORM 1